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APPLICANTS

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** 12/04/2003

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|---|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY CO | SHEETS DRAWING 7 | TOTAL CLAIMS 24 | INDEPENDENT CLAIMS 5 |
| Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Examiner's Signature <i>[Signature]</i> | | Initials <i>MP</i> | | | |

ADDRESS

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TITLE

Snorkeling apparatus

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| FILING FEE RECEIVED | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) |
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